



Retirement Allowance Estimate Request

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442

This is not an application for retirement. This is a request for an estimate of potential future retirement benefit amounts. You are limited to two CalPERS-generated estimate requests in a 12-month period and must be within one year of retirement. See the back of this form for detailed instructions.

Section 1

Provide the address you would like your estimated retirement allowance sent to.

Information About You

Name of Member (First Name, Middle Initial, Last Name)		Social Security Number or CalPERS ID	
Birth Date (mm/dd/yyyy)	() Daytime Phone	() Evening Phone	
Address			
City	State	ZIP	

Section 2

Not all CalPERS members are eligible for industrial disability retirement. Contact your personnel office for eligibility information.

Retirement Information

Type of estimate for your retirement allowance ☐ Service ☐ Disability ☐ Industrial Disability

Employer	Projected Retirement Date (mm/dd/yyyy)
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Are you a member of another retirement system that has established reciprocity with CalPERS? ☐ No ☐ Yes

Name of System	Estimate Final Compensation Amount
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If your membership date is January 1, 2002, or later, the amount of your Temporary Annuity cannot exceed the estimated amount of your Social Security benefit at the age designated in this election.

Temporary Annuity - Complete the information below to request a Temporary Annuity estimate. Available for service retirement only.

For an additional Temporary Annuity allowance, you elect to reduce your monthly allowance for life. ☐ No ☐ Yes

If you first became a member on January 1, 2002, or later, you elect to receive Temporary Annuity until age _____ in the amount of \$ _____ per month.
(62 to 70) Dollars

..... or

If you first became a member prior to January 1, 2002, you elect to receive Temporary Annuity until age _____ in the amount of \$ _____ per month.
(59½ or whole age 60 to 68) Dollars

Section 3

Individual Lifetime Beneficiary (2, 2W, 3, 3W, 2W/1 and 3W/1)

Name of Beneficiary	Relationship to You	Birth Date (mm/dd/yyyy)
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Section 4

Information About Your Survivor Continuance

Do you have an eligible survivor? ☐ No ☐ Yes

Section 5

CalPERS will provide an estimate for standard Options 1, 2, 2W, 3, 3W, 2W/1 and 3W/1, and Unmodified Allowance. If these do not meet your needs, you may request one of the approved Option 4 types listed at right.

Your Option 4 Retirement Options

<input type="checkbox"/> Specific Percentage to Beneficiary _____ % Percentage	<input type="checkbox"/> Specific Dollar Amount to Beneficiary \$ _____ Amount
<input type="checkbox"/> Reduced Allowance by _____ through _____ Percentage or Dollar Amount Date (mm/yyyy)	
<input type="checkbox"/> Multiple Lifetime Beneficiaries _____ Birth Date (mm/dd/yyyy)	Birth Date (mm/dd/yyyy) Birth Date (mm/dd/yyyy)
<input type="checkbox"/> Reduced Allowance Upon Death of Member or Beneficiary \$ _____ Reduction Amount	

Mail to:

CalPERS Benefit Services Division • P.O. Box 942717, Sacramento, California 94229-2717

Section 1

Information About You

Name: Provide your first name, middle initial, and last name.

CalPERS ID or Social Security Number: Provide your CalPERS ID or Social Security Number.

Birth Date: Provide month, day, and complete year.

Mailing Address: Provide the mailing address where you want to receive your estimated retirement allowance.

Telephone Number(s): Provide us your home and/or work number in case we need to reach you.

Section 2

Information About Your Retirement Estimate

Projected Retirement Date: List your projected retirement date. The minimum retirement age for service retirement for most CalPERS members is age 50 with five years of CalPERS service credit. State members under the Second Tier retirement plan must be 55 years old with ten years of service credit. There are some exceptions to these requirements.

Type of Estimate for Retirement Allowance: Select the type of retirement estimate you wish to receive. Not all CalPERS members are eligible for an industrial disability retirement. Please contact your personnel office for information on eligibility.

Other California Public Retirement Systems: Reciprocity is an agreement CalPERS has with many California public retirement systems that allows movement among public employers within a specified time limit, without losing valuable retirement and related benefit rights. For additional information please refer to the *When You Change Retirement Systems* publication.

Final Compensation Period: Your final compensation is the highest average salary during any consecutive 12 or 36 month period. Which compensation period we use depends on your employer's contract with CalPERS. myCalPERS automatically finds and uses the highest compensation period during your employment with CalPERS.

Temporary Annuity is an additional monthly income you may choose to augment your pension from CalPERS. If you take a disability retirement, a Temporary Annuity is not available. The benefit is payable from your retirement date to a specific age that you select. If your CalPERS membership date is prior to 01/01/2002, you may choose age 59½ or any whole age from 60-68. If your CalPERS membership date is on or after 01/01/2002, you may choose any whole age 62-70. You can also name the dollar amount you wish to receive (certain limitations apply; please refer to the *Temporary Annuity* publication). If your CalPERS membership date is on or after 01/01/2002 the amount of Temporary Annuity cannot exceed the amount expected from Social Security at the age specified, provided you made contributions to Social Security while employed with a CalPERS employer. It is important to note that this benefit is not free. Your CalPERS monthly lifetime retirement allowance is reduced to pay for your Temporary Annuity. For additional information, please refer to the *Temporary Annuity* publication.

Section 3

Individual Lifetime Beneficiary (2, 2W, 3, 3W, 2W/1 and 3W/1)

A **beneficiary** is any person(s) you designate to receive a benefit after your death. If you would like to provide a lifetime monthly benefit to a beneficiary, we need their date of birth.

Relationship to You: A beneficiary can be a spouse, child, friend, etc.

Beneficiary Birth Date: Provide month, day, and complete year.

Section 4

Information About Your Survivor Continuance

Survivor Continuance is an employer-paid benefit payable to an eligible survivor upon your death. An eligible survivor is a spouse married to you or a domestic partner legally recognized in California as your domestic partner on and at least one year prior to your tentative retirement date and continuously until your death (for Disability or Industrial Disability Retirement, these conditions must be met on or before the effective date of your disability or industrial disability retirement); or an unmarried child under age 18 or disabled; or an economically dependent parent.

Section 5

Your Retirement Options

CalPERS will provide you an estimate for the standard options (1, 2, 2W, 3, 3W, 2W/1 and 3W/1). If none of these meets your needs, you may request **one** of the Option 4 allowances, as long as the amount to your beneficiary(ies) is not more than the benefit provided under Option 2W. For additional information please refer to the *Retirement Option 4* publication.